

## UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)

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U. S. Application No. 10/540834  
Publication Date 7-72-04  
Publication No. WO 2004/080923 PCT/RO/101 ☒  
Copy of ISR JP, Copy of IPER \_\_\_\_\_  
Assignee information: \_\_\_\_\_  
Priority Info: Country JP No. 2002-82176 date 12-27-02 MORE  
Correspondence checked: 24256 deposit account \_\_\_\_\_  
Inventor Residence city: Fukushima state and/or country JP citizenship: JP  
International Application No. PCT JP2003/016333 Language JP  
Copy in International Application: ☒; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ Spec.pg no. \_\_\_\_\_  
371 Filing Fees: 100; US IPER meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_  
Total Claims: 19 Chargeable 19 Independent 3 multiple 16  
Number of drawing Sheets: \_\_\_\_\_ Foreign language: \_\_\_\_\_  
Oath/Declaration: ☒ signed \_\_\_\_\_ unsigned \_\_\_\_\_ defective \_\_\_\_\_ completed 6-23-05 Power of Attorney: \_\_\_\_\_  
Small entity fee: \_\_\_\_\_ SME document yes \_\_\_\_\_ no \_\_\_\_\_  
Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_  
Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_  
Copy ISA References \_\_\_\_\_  
Copy of IPER: \_\_\_\_\_; Annexes: \_\_\_\_\_ entered \_\_\_\_\_ not entered \_\_\_\_\_ Text sequence improper \_\_\_\_\_  
Preliminary Amendment(s): \_\_\_\_\_ date: \_\_\_\_\_; 2<sup>nd</sup> amendment date \_\_\_\_\_  
IDS: \_\_\_\_\_ DATE: \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ DATE \_\_\_\_\_  
Request for Immediate Examination: ☒  
Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_  
Assignment: ☒ forwarded to Assignment branch date: 1  
Priority Document(s): ☒ Number of copies included 1  
Date of 35 USC Receipt of Request: 6-23-05 Notes: \_\_\_\_\_  
Date Completion USC 371 Requirements: 6-23-05 |  
Notice of Missing Requirements: \_\_\_\_\_ |  
Notice of Defective Response: \_\_\_\_\_ |  
Notice of Acceptance: 12-16-05 |  
Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_  
Other forms: \_\_\_\_\_ Extension of time: Number of months \_\_\_\_\_